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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875				Application or Docket Number 10/561,889	Filing Date 09/06/2006	<input type="checkbox"/> To be Mailed
APPLICATION AS FILED – PART I				OTHER THAN SMALL ENTITY		
(Column 1) FOR	NUMBER FILED N/A	NUMBER EXTRA N/A	SMALL ENTITY <input checked="" type="checkbox"/> OR	RATE (\$) <input type="checkbox"/> N/A	RATE (\$) <input type="checkbox"/> N/A	
<input type="checkbox"/> BASIC FEE (37 CFR 1.16(a), (b), or (c))	N/A	N/A	OR	<input type="checkbox"/> RATE (\$) <input type="checkbox"/> N/A	<input type="checkbox"/> RATE (\$) <input type="checkbox"/> N/A	
<input type="checkbox"/> SEARCH FEE (37 CFR 1.16(b), (f), or (m))	N/A	N/A	OR	<input type="checkbox"/> RATE (\$) <input type="checkbox"/> N/A	<input type="checkbox"/> RATE (\$) <input type="checkbox"/> N/A	
<input type="checkbox"/> EXAMINATION FEE (37 CFR 1.16(c), (g), or (j))	N/A	N/A	OR	<input type="checkbox"/> RATE (\$) <input type="checkbox"/> N/A	<input type="checkbox"/> RATE (\$) <input type="checkbox"/> N/A	
TOTAL CLAIMS (37 CFR 1.16(j))	minus 20 =	*	OR	<input type="checkbox"/> X \$ =	<input type="checkbox"/> X \$ =	
INDEPENDENT CLAIMS (37 CFR 1.16(h))	minus 3 =	*	OR	<input type="checkbox"/> X \$ =	<input type="checkbox"/> X \$ =	
<input type="checkbox"/> APPLICATION SIZE FEE (37 CFR 1.16(s)) <input type="checkbox"/> MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))						
* If the difference in column 1 is less than zero, enter "0" in column 2.			TOTAL			
APPLICATION AS AMENDED – PART II				OTHER THAN SMALL ENTITY		
(Column 1) AMENDMENT	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	SMALL ENTITY <input type="checkbox"/> OR	RATE (\$) <input type="checkbox"/> X \$26 =	RATE (\$) <input type="checkbox"/> OR X \$ =
07/27/2010	* 25	Minus ** 23	= 2	OR	<input type="checkbox"/> 52	<input type="checkbox"/> ADDITIONAL FEE (\$)
Total (37 CFR 1.16(h))	- 7	Minus ***4	= 3	OR	<input type="checkbox"/> 330	<input type="checkbox"/> X \$ =
<input type="checkbox"/> Application Size Fee (37 CFR 1.16(s))						
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))						
TOTAL ADD'L FEE			TOTAL ADD'L FEE			
(Column 1) AMENDMENT	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	SMALL ENTITY <input type="checkbox"/> OR	RATE (\$) <input type="checkbox"/> X \$ =	RATE (\$) <input type="checkbox"/> OR X \$ =
Total (37 CFR 1.16(h))	-	Minus **	=	OR	<input type="checkbox"/> X \$ =	<input type="checkbox"/> ADDITIONAL FEE (\$)
Independent (37 CFR 1.16(h))	-	Minus ***	=	OR	<input type="checkbox"/> X \$ =	<input type="checkbox"/> X \$ =
<input type="checkbox"/> Application Size Fee (37 CFR 1.16(s))						
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))						
TOTAL ADD'L FEE			TOTAL ADD'L FEE			

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

Legal Instrument Examiner:
/DIANE WILLIAMS/